

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

|  |   |                           |
|--|---|---------------------------|
| In re Application                            | ) | <u>PATENT APPLICATION</u> |
|  | ) |                           |
| Inventor: Hem P. Takiar                      | ) |                           |
|  | ) |                           |
| Application No.: Unknown                     | ) |                           |
|  | ) |                           |
| Filed: Herewith                              | ) |                           |
|  | ) |                           |
| Title: PERIPHERAL CARD WITH HIDDEN TEST PINS | ) | <u>Customer No. 28554</u> |
|  | ) |                           |

**POWER OF ATTORNEY**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

I hereby appoint DeNIRO, Kirk J. (Reg. No. 35,854), MAGEN, Burt (Reg. No. 37,175), MARCUS, Brian I. (Reg. No. 34,511), and VIERRA, Larry E. (Reg. No. 33,809), as our attorneys or agents to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

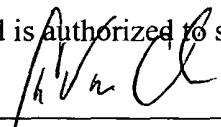
Please direct all telephone calls and correspondence for the above-identified application to:

Burt Magen, Esq.  
Vierra Magen Marcus Harmon & DeNiro LLP  
685 Market Street, Suite 540  
San Francisco, California 94105  
Telephone: 415.369.9660, Facsimile: 415.369.9665

SanDisk Corporation is the assignee of the entire right, title and interest in the above-identified patent application. I, the undersigned, declare that I have reviewed copies of the documentary evidence establishing chain of title to the patent application identified above from the inventors to the assignee which:

is filed for recordation herewith; or  
 was recorded at Reel \_\_\_, Frame \_\_\_; or  
 has been sent for recordation under separate cover, a copy attached herewith.

The undersigned is authorized to sign this document on behalf of the assignee.

Signature: 

Date: July 15, 2003

Name: Charles Van Orden

Title: Vice President & General Counsel

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration Submitted with Initial Filing      OR       Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

|                          |               |
|--------------------------|---------------|
| Attorney Docket Number   | SAND-01004US0 |
| First Named Inventor     | Takiar        |
| <b>COMPLETE IF KNOWN</b> |               |
| Application Number       |               |
| Filing Date              |               |
| Art Unit                 |               |
| Examiner Name            |               |

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**PERIPHERAL CARD WITH HIDDEN TEST PINS**

*(Title of the Invention)*

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY)    as United States Application Number or PCT International

Application Number    and was amended on (MM/DD/YYYY)    (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s)  | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed   | Certified Copy Attached? YES   | Certified Copy Attached? NO  |
|--|---------|----------------------------------|--|--|--|
|  |         |                                  | <input type="checkbox"/><br><input type="checkbox"/><br><input type="checkbox"/> | <input type="checkbox"/><br><input type="checkbox"/><br><input type="checkbox"/> | <input type="checkbox"/><br><input type="checkbox"/><br><input type="checkbox"/> |
| <input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: |         |                                  |  |  |  |

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION — Utility or Design Patent Application

Direct all correspondence to:  Customer Number \_\_\_\_\_  OR  Correspondence address below or Bar Code Label \_\_\_\_\_

Burt Magen, Vierra Magen Marcus Harmon &amp; DeNiro LLP

Name

685 Market Street, Suite 540

Address

|         |               |           |              |     |              |
|---------|---------------|-----------|--------------|-----|--------------|
| City    | San Francisco | State     | California   | ZIP | 94105        |
| Country | USA           | Telephone | 415.369.9660 | Fax | 415.369.9665 |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

|                                  |   |
|----------------------------------|---|
| NAME OF SOLE OR FIRST INVENTOR : | <input type="checkbox"/> A petition has been filed for this unsigned inventor |
|----------------------------------|---|

|   |        |                           |        |
|---|--------|---------------------------|--------|
| Given Name<br>(first and middle [if any]) | Hem P. | Family Name<br>or Surname | Takiar |
|---|--------|---------------------------|--------|

|                         |   |      |         |
|-------------------------|---|------|---------|
| Inventor's<br>Signature |  | Date | 7/14/03 |
|-------------------------|---|------|---------|

|                 |           |       |            |         |     |             |
|-----------------|-----------|-------|------------|---------|-----|-------------|
| Residence: City | Sunnyvale | State | California | Country | USA | Citizenship |
|-----------------|-----------|-------|------------|---------|-----|-------------|

|                 |                      |  |  |  |  |  |
|-----------------|----------------------|--|--|--|--|--|
| Mailing Address | 1544 Blackfoot Drive |  |  |  |  |  |
|-----------------|----------------------|--|--|--|--|--|

|      |         |       |            |     |       |         |     |
|------|---------|-------|------------|-----|-------|---------|-----|
| City | Fremont | State | California | ZIP | 94539 | Country | USA |
|------|---------|-------|------------|-----|-------|---------|-----|

|                          |   |
|--------------------------|---|
| NAME OF SECOND INVENTOR: | <input type="checkbox"/> A petition has been filed for this unsigned inventor |
|--------------------------|---|

|   |                           |
|---|---------------------------|
| Given Name<br>(first and middle [if any]) | Family Name<br>or Surname |
|---|---------------------------|

|                         |      |
|-------------------------|------|
| Inventor's<br>Signature | Date |
|-------------------------|------|

|                 |       |         |             |
|-----------------|-------|---------|-------------|
| Residence: City | State | Country | Citizenship |
|-----------------|-------|---------|-------------|

|                 |  |  |  |
|-----------------|--|--|--|
| Mailing Address |  |  |  |
|-----------------|--|--|--|

|      |       |     |         |
|------|-------|-----|---------|
| City | State | ZIP | Country |
|------|-------|-----|---------|

Additional inventors are being named on the \_\_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.